

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 6

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ERICKSON RETIREMENT COMMUNITIES FEDERAL PAC

A.

Full Name (Last, First, Middle Initial)

John Erickson

Mailing Address 100 Harborview Dr. PH 4A

City

Baltimore

State

MD

Zip Code

21230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erickson Retirement Commu-
nity

Occupation

CEO & Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.4147

Amount of Each Receipt this Period

2000.00

Personal check

B.

Full Name (Last, First, Middle Initial)

Nancy Erickson

Mailing Address 100 Harborview Dr. PH 4A

City

Baltimore

State

MD

Zip Code

21230

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.4148

Amount of Each Receipt this Period

2000.00

Personal check

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

4000.00